

**Shoreham Village
Board of Directors Meeting – Minutes
May 17, 2023**

Present (via Teams) Joseph Green, Elizabeth Finney, Andrew Snyder, Brian Webb, Alison Kelland, Colleen Richardson, Janet Simm, and Jennifer Tucker

Regrets: Reinhard Jerabek

Guests Kim Croft, Occupational Health & Infection Control Specialist

1. Welcome and Introductions

- The meeting was called to order at 4:02 pm
- The Chair welcomed Colleen Richardson to the meeting. She has joined the Board.

2. Approval of Agenda

Motion to approve agenda as circulated. Alison Kelland and seconded by Andrew Snyder. Motion Carried.

3. Approval of Minutes – March 22, 2023

A paragraph was removed from the minutes, as it should have been discussed in camera. In the future we will need to be mindful of discussions and ensure that we go in camera as necessary.

Motion to approve the March 22, 2023 minutes as amended. Andrew Snyder, and seconded by Brian Webb. Motion Carried.

4. Board Education: OH&S Presentation

Kim Croft, Occupational Health & Infection Control Specialist provided an overview of the Occupational Health and Safety Committee and practices at Shoreham.

- Accreditation component has been added to the agenda for the Joint Occupational Health and Safety Committee meetings.
- We had our first Department of Labour visit. It was a good opportunity, and went well.
- Incident forms have been updated. Staff, volunteers, and visitors continue to fill out a paper incident form, and medication incidents are filled out on paper. Resident incidents are reported online through the Point Click Care system.
- Department of Labour exercise was reviewed for trends. Physical aggression was 85% of incidents. Education on the Gentle Persuasion Approach (GPA) has been provided to help staff properly handle difficult resident situations. The review assisted in making a focused goal plan.
- A survey about workplace violence was given to staff to complete.
- An active review on strains and sprains is being done. Lifts and transfer education is being provided for staff.
- The risk management codes that are used at Shoreham is the same that is being used throughout the sector. A list of these codes are included with staff orientation and is also given to staff with their ID badge.
- There has been positive feedback from staff about the Joint Occupational Health & Safety Committee. Staff feel the committee is very responsive, and are pleased to have this committee's support.

The Chair thanked Kim for the very informative presentation.

5. Business Arising

5.1 **Formal Partnership Evaluation with Dalhousie University**

- The CEO has no update at this time. She has a meeting next week with the original contact Tara Sampalli, so hopefully there will be an update on the status of this evaluation.
- This item will remain on the agenda.

5.2 **Fundraising**

- The Chair heard from community members, that there may be some people interested in fundraising for Shoreham. They would not necessarily be on the Board, but could be involved with fundraising efforts.
- The Chair noted that if the discontinuation of the Foundation leaves resident needs unmet, then we need to look at starting a Fundraising committee, or a sub committee of the Board to help fill the gap.
- The Chair and CEO will discuss over the next few weeks where the potential gaps in funding exist that could be supported by the committee. Once those areas are identified, then the next steps will need to be determined.
The committee would need to be accountable to the Board, and at least one member of the Board should be part of the committee.
- Shoreham is a registered charity and is capable of issuing tax receipts.
- This item will remain on the agenda.

5.3 **Next Phase of the Garden Project**

- The Board has previously approved \$25,000 to be spent towards the garden project. Approximately \$10,000 was spent to clear bushes and remove small buildings.
- The garden project will be completed in a phased approach.

5.4 **Board Planning Cycle Update**

-Provincial Board Governance Training Resource

- The CEO was approached by the consultant that is providing Provincial Board Governance Training. They want to know if our Board is interested in receiving the training, and if so, they would like to book a date.
- The CEO feels that our Board has solid processes in place, and with the upcoming Accreditation it may be best to defer the training until the fall. The Board was in agreement.
- The CEO will inform them that we would be looking at late fall/winter date for the training.

6. New Business

6.1 **June 16 meeting – date/finance team support**

- Reinhard had a schedule conflict and was not able to attend today's meeting. He has offered to answer any questions. Please ensure that all members of the Board are copied on any questions submitted.
- Reinhard is unable to attend the June 16th Financial Meeting. Peter Bentley works closely with Reinhard and will be attending in his absence. Peter is very knowledgeable on our practices and financials.
- The Board is comfortable with Peter joining the meeting on June 16th

7. Chairs Report

7.1 AGM Planning – see draft agenda attached

7.1.1 Member Notice and Public Invitations

- This year’s Annual General Meeting will be held virtually and will be opened to the public.
- A notice will go out to family members inviting them to attend, and a notice will also be posted on our website.
- Board member fees are due. The Chair volunteered to pay the \$5 fee for all current Board members, and they can just pay him back.

8. Monitoring Performance

8.1 Board of Director Policy Review

- This is a standing item on the Board Planning Cycle for every June.
- Last year’s policy review was very intense and detail orientated. This year’s review should be simplified.
- The policy review will be done in the fall around the time of the Provincial Governance Training.

9. Finance Report

9.1 Financial Statements to Feb 28, 2023 (Attachment)

- No questions were brought forth by the Board.

10. Quality Improvement/CEO Report/Risk Report (Attachment)

10.1 Q4 Scorecard (4:30 pm)

- Occupancy is holding steady. Nearing target of 99.2%. Completion of the resident room project has contributed to the increase.
- Respite utilization is back to normal levels before the pandemic.
- Big increase in incident reporting since last quarter. 594 overall incidents. Orientation and new staff training has helped with staff reporting.
- Improvement in recruitment and staffing. There are new staff starting in June, which will be Shoreham staff. Having our own staff will improve incident reporting, as they will be more invested and more likely to report. There has been a huge improvement in the reporting of the travelling staff.
- Gentle Persuasive Approach (GPA) training is important to help reduce the severity of an incident. No incidents resulted in injuries this quarter.
- Falls increased this quarter. The Lifts and transfers team reviews and looks at interventions. If the fall risk can not be reduced, then we find ways to reduce the potential injury.
- 1 fall resulted in a critical incident, and was reported to the Department of Seniors and Long Term Care. It did not meet the criteria and we were informed that all things to help prevent the incident were already in place.
- There has been a decrease in medication errors, as staff are more comfortable with the EMar system. Transcription errors has improved.

- ISMP is a self assessment used to examine and improve processes. The assessment tool was completed and submitted. Once we receive it back, then it can be implemented. Shoreham and Northwood are the only two organizations participating in the province.
- Infections increased. 12 were covid infections. The post antibiotic assessment was not being completed to see if treatment was affective, so in reality it was one infection that was captured multiple times due to the post assessment not being completed.
Kim has been working with staff to ensure that the post antibiotic assessment does not get missed. An infection control module in Point Click Care has been implemented, and built in flags have been added for antibiotic use.
- 5 Pressure injuries, that continue to improve. 3 are chronic wounds that will probably not heal, and two we are working to improve. 1 wound was facility inquired, which resulted in doing a building wide assessment on all residents. HANS and our disciplinary teams were consulted.
- Wound care team works to ensure wound and skin care practices are meeting the best standards of care.
- 98% of opportunities met for hand hygiene audits. On the spot education provided to staff if opportunity was missed.
- 113 active volunteers. We continue to recruit and investigate the Volgistics Software for volunteer tracking.

10.2 New Building Project – Step 3 Submission revisions

- The CEO shared a rendering of the current facility design, which was part of the Step 3 submission to government. The land swap agreement with the apartments needs to be finalized before they are able to approve the design. There is a 14 step process involved in a facility replacement. Step 3 and 4 are the most time consuming steps in the process.
- Pictures of the rendering design were shared at the Family Council Meeting.
- In the new design rendering, a pedestrian walkway will be added around the building and will connect into our current pathways.
- The Building renewal project budget will include a landscaping budget, but it will not be extensive. We doubt there will be an allowance for walkways.

10.3 On site Staff Housing Opportunity

- The potential land donation is a very challenging piece of land. Syd Dumaresq was asked to create a draft design. This will help us determine if using this land to build staff housing will be feasible.
- Syd will speak to the municipality about height and parking guidelines and limitations.
- There may be another community opportunity for housing staff, which will be investigated.

10.4 Recruitment and retention

- First refugee to arrive in early June.
- The administrative team were advised of a payroll error. The pay scale was entered incorrectly into the payroll system, which resulted in the administrative team being overpaid. The affected staff have been offered flexible options to payback the money owing.
- Further clarification on staff qualifications for the retention bonus has been requested by government.
- There is a federal bill that may be implemented by government, which would hold management responsible for issues that happen in long term care. More details and discussions will come in the future.

10.5 Family Council Meeting debrief

- Meeting was held on April 25th and there was good attendance
- Alison attended the meeting and found that significant issues were discussed and that the meeting was very informative.
In the future, it would be nice if at least one board member could attend these meetings.

10.6 Motion to approve the land swap agreement with the Apartments

- Our Lawyer is available to answer any questions about the agreement.
- Any variables in the conditions of the land swap are covered in the agreement. The land swap only goes into affect if certain conditions are met.
- We are getting more from the land swap, so there will be money owed to the Apartments as part of the agreement. The CEO will find the figure of the amount owing, and will share with the Board post meeting.
- The land the Apartments is swapping still has a mortgage on it, so the agreement includes the lender, as well as the Apartments.
- Both our lawyer, and the Apartments lawyer have reviewed the agreement, and the Apartments association has already signed.

Motion to approve the land swap agreement with the Apartments. Moved by Brian Webb, seconded by Liz Finney. Motion Carried.

The Directors Resolution will be kept at the front office at Shoreham for Board signatures.

11. Accreditation (Survey visit October 3,4,5 2023)

11.1 Governance Tool/Self-Assessment Action Plan follow up

11.1.1 Document/Cheat Sheet

- The CEO continues to update this document to assist the Board with Accreditation.
- No dates have been provided for when Accreditation will be meeting with the Board.
- The Chair and CEO reviewed the documents thoroughly, and are working on a draft.
- The Chair evaluation may, or may not, be something that we want to move forward with.
- The Board felt it was a good tool, and well done.
- A more finalized draft will come in the future.

11.1.2 Board Meeting/Board functioning Evaluation Potential Tool

- Previously discussed

11.1.3 Board Skills Inventory completion

- All Board members have responded. New board members will be asked to complete a skills assessment as part of their orientation.

12. Meeting Evaluation

- There were some issues with Microsoft teams. Maybe zoom could be considered in the future
- Good discussion
- Some audio issues
- Covered lots of material
- It was nice to see the rendering of the new facility design.
- The presentation on Occupational Health and Safety was very informative.

13. Next Regular Meeting:

13.1 June 16, 2023, 4:00 pm – Review of Draft Audited Statements, Budget Presentation/Approval

13.2 June 21, 2023, 4:00 pm – AGM

13.3 June 21, 2023, 5:00 pm – Board meeting

14. In Camera

In camera discussion: *The paragraph removed from the March 22, 2023 minutes contained information regarding a decision that had not been finalized.*

15. Adjournment

Adjourned at 6:20 and meeting went in camera.

***Recording Secretary,
Tammy Conrad***